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APPLICANTS

Michael S. Parmacek, Bryn Mawr, PA;
 Julian Solway, Glencoe, IL;

**** CONTINUING DATA *******

This application is a 371 of PCT/US97/16204 08/29/1997

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ****

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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 3	TOTAL CLAIMS 53	INDEPENDENT CLAIMS 7
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

Mark B Wilson
 Fulbright & Jaworski
 Suite 2400
 600 Congress Avenue
 Houston, TX78701

TITLE

PROMOTER FOR SMOOTH MUSCLE CELL EXPRESSION

FILING FEE RECEIVED 2071	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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